2018 Current Fiscal Year Report: Rehabilitation Research and Development Service Scientific Merit Review Board

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1. Department or Agency	2. Fiscal Year
Department of Veterans Affairs	2018

3. Committee or Subcommittee	3b. GSA Committee No.
Rehabilitation Research and Development Service Scientific Merit Review Board	2019

4. Is this New During Fiscal Year?	5. Current Charter	6. Expected Renewal Date	7. Expected Term Date
No	05/04/2016	05/04/2018	

8a. Was Terminated During FiscalYear?	8b. Specific Termination Authority	8c. Actual Term Date
No		

9. Agency Recommendation for Next FiscalYear	10a. Legislation Req to Terminate?	10b. Legislation Pending?
Continue	No	Not Applicable

11. Establishment Authority Agency Authority

12. Specific Establishment Authority	13. Effective Date	14. Commitee Type	14c. Presidential?
38 USC 7303	08/18/1978	Continuing	No

15. Description of Committee Scientific Technical Program Advisory Board

16a. Total Number of Reports No Reports for this FiscalYear

17a. Open 0 **17b. Closed** 2 **17c. Partially Closed** 21 **Other Activities** 0 **17d. Total** 23

Meetings and Dates

Purpose	Start	End

The Small Projects in Rehabilitation Research (SPiRE) Subcommittee (RRDS) focuses on research that is broadly intended to support projects that are more appropriately addressed by shorter and smaller investigations (i.e., less time and resource intensive) than a full merit research application. These experiments may include applications that have high risk, but high potential impact, applications from early career stage investigators, senior investigators seeking to explore avenues of research outside of their current area of study, as well as research areas lacking extensive or any preliminary data. SPiRE proposals cover all portfolio areas within rehabilitation research and development. Research in this program strives to examine potential interventions with potential to promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans. For the Fall 2017 cycle, RRDS completed a mail-in only editorial review of 47 small project applications in rehabilitation research via a mail-in critique and score for each application completed by three or more assigned reviewers. Summary statements and scores were shared with the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, for consideration of funding based on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of SUICIDE, and feasibility of the small project proposals. NOTE: No meeting minutes as this is an editorial mail-in only scientific review.	10/24/2017 - 10/24/2017
The Regenerative Medicine Subcommittee (RRD0) reviews research developing novel cell-based regenerative technologies that repair damaged tissues in order to restore function and independence in Veterans living with spinal cord injury, traumatic brain injury, stroke, osteoarthritis, and other injuries and diseases. These technologies may ultimately allow GREATER CHOICE by improving Veteran-driven care and providing VA healthcare providers with personalized technologies matched to the clinical needs of Veterans living with these and other debilitating conditions. In February 2018, RRD0 reviewed 16 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and the feasibility of proposals on regenerative approaches to repair and restore a Veteran's function following chronic traumatic or disease related degeneration of the musculoskeletal or nervous systems.	02/27/2018 - 02/27/2018
The Psychological Health and Social Reintegration Subcommittee (RRD4) examines new interventions that enable Veterans to live more successful lives. Research reviewed by the Psychological Health and Social Reintegration Subcommittee may ultimately enhance community care by improving relationships between Veterans and their healthcare providers. Research on new technologies and platforms evaluates easier and TIMELY ACCESS TO SERVICES, works to reduce SUICIDE RISK and Veteran homelessness, and provides job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. Examples of research reviewed by the Subcommittee includes, but is not limited to: development of cognitive measures, cognitive rehabilitation, cognitive behavior therapy to manage pain, complementary medical techniques to treat mental and physical conditions, rehabilitation of cancer patients and survivors, reduction of obesity, use of telehealth, and strategies for optimizing vocational rehabilitation and community reintegration for Veterans. In February 2018, RRD4 reviewed 29 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of SUICIDE, and feasibility of rehabilitation research proposals related to mental health, cognitive functioning, physical disabilities, chronic illnesses, vocational rehabilitation and community reintegration.	02/27/2018 - 02/27/2018

The Rehabilitation Engineering and Prosthetics/Orthotics Subcommittee (RRD5) improves the quality of care, GREATER CHOICE and IMPROVED TIMELINESS of care, within the Veterans Health Administration by focusing on the development of devices, technology, and algorithms. Research in engineering and technology intends to improve the lives of Veterans with disabilities with an emphasis on device development/ improvement. Research in this area includes, but is not limited to: neural prostheses (motor and sensory), rehabilitation robotics, rehabilitative sensing and telemetry, prosthetic socket design, orthotics, mobile technology, virtual reality, and potential "orphan technologies" that are specific to Veterans. In February 2018, RRD5 reviewed 15 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to engineering and technology.	02/27/2018 - 02/27/2018
The Brain Injury: TBI and Stroke Subcommittees (RRD1 reviews research on traumatic brain injury (TBI) as a major risk factor for related psychological health conditions. Without a comprehensive diagnosis, the combination of these conditions can increase the risk of homelessness and SUICIDE for some Veterans. Proposals reviewed by the Brain Injury Subcommittees are actively developing diagnostics to identify Veterans with chronic TBI so they can be treated before entering the downward spiral toward homelessness or increased risk of SUICIDE. This Subcommittee also reviews proposals aimed at improving diagnosis of chronic central nervous system changes due to the injury and functional disability associated with these conditions; animal and human studies evaluating novel treatments either alone or in combination with other therapies; and application of neuroimaging to the rehabilitation of stroke and TBI. In February 2018, RRD1 reviewed 28 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of SUICIDE, and feasibility of rehabilitation research proposals related to TBI and stroke rehabilitation and/or treatments to enhance recovery from these events.	02/27/2018 - 02/28/2018
The Sensory Systems and Communication Disorders Subcommittee (RRD3) reviews research that promotes scientific advances supporting world-class comprehensive specialized healthcare and improved quality of life for Veterans. These interventions have the potential to promote GREATER CHOICE and IMPROVED TIMELINESS of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, and by developing technologies to decrease barriers to ACCESS by Veterans who cannot hear, see, or speak. Research reviewed by the Sensory Systems and Communication Disorders Subcommittee focuses on the diagnosis, treatment, and rehabilitation of the most common debilitating problems faced by Veterans: hearing disorders including tinnitus (abnormal sounds), noise-, blast-, or age-related hearing loss, hearing aids, cochlear implants, and aural rehabilitation; balance disorders; visual impairment, including macular degeneration, diabetic retinopathy, and low vision; dysphagia or swallowing disorders; disorders of speech and language production and perception, including vascular- or trauma-related aphasia and dysarthria; and multisensory impairment. In February 2018, RRD3 reviewed 14 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to sensory systems and communication disorders.	02/28/2018 - 02/28/2018

The Career Development Award Subcommittee (RRD8) focuses on research that encompasses content areas from all of the Rehabilitation Research and Development Service's portfolios. Research in this program strives to examine potential interventions that promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. The program was designed to attract, develop, and retain talented VA-ORD researchers in areas of particular importance to VA. In this program, both clinically and non-clinically trained post-doctoral researchers may gain mentored research time intended to advance awardees toward independence as funded VA-ORD scientists. Implicit in all applications is the understanding that the applicants plan to continue their careers within VA. Awardees from this program have become national and international leaders in their research fields. In February 2018, RRD8 reviewed four Level I (IK1) and 13 Level II (IK2) applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit and mission relevance of the research plan including protection of animal and human subjects, especially for those at risk of SUICIDE; the applicant's demonstration of a high degree of potential in his/her area of interest to develop into an independent research scientist; and the applicant's mentor(s) qualifications, training program, and strong commitment to VA.	02/28/2018 - 02/28/2018
The Musculoskeletal/Orthopedic Subcommittee (RRD2) advances development of effective interventions with the potential for GREATER CHOICE and IMPROVED TIMELINESS by providing VA healthcare providers with evidence-based treatments matched to the clinical needs of Veterans recovering from life-threatening wounds (trauma) and chronic limitations, particularly military-acquired conditions and diseases, to ultimately improve the quality of life of Veterans. Examples of research reviewed by the Subcommittee include, but are not limited to: telehealth/telerehabilitation, exercise, nutrition, and other treatments to improve muscle structure and function, improve nervous system control, increase metabolic activity, decrease pain, reduce falls, and enhance daily function after injury and disease. In February 2018, RRD2 reviewed 36 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to musculoskeletal, orthopedic and medical conditions.	02/28/2018 - 03/01/2018
The Aging and Neurodegenerative Disease Subcommittee (RRD6) focuses on cutting-edge pre-clinical, applied and clinical research on therapies to improve the rehabilitation and quality of life for aging Veterans and those Veterans dealing with neurodegenerative diseases. Examples of research reviewed by the Subcommittee include, but are not limited to: creation of new physical rehabilitation strategies for Veterans suffering from Parkinson's disease, Alzheimer's disease, Amyotrophic Lateral Sclerosis, Multiple Sclerosis, and rehabilitation from conditions of age including frailty, muscle atrophy, dementia, incontinence and falls. These interventions in a foundational area have the potential to produce GREATER CHOICE and IMPROVED TIMELINESS with treatments matched to the clinical needs and preferences of the Veteran, and enhance community care by improving relationships between the Veteran and their healthcare providers. Research reviewed by the Subcommittee focuses on the rapid development of effective new treatments and rehabilitative strategies for Veterans dealing with neurodegenerative diseases and the natural consequences of aging. In March 2018, RRD6 reviewed 3 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to aging and neurodegenerative disease.	03/01/2018 - 03/01/2018

The Career Development Award Subcommittee (RRD9) focuses on research that encompasses content areas from all of the Rehabilitation Research and Development Service's portfolios. Research in this program strives to examine potential interventions that promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. The program was designed to attract, develop, and retain talented VA-ORD researchers in areas of particular importance to VA. In this program, both clinically and non-clinically trained post-doctoral researchers may gain mentored research time intended to advance awardees toward independence as funded VA-ORD scientists. Implicit in all applications is the understanding that the applicants plan to continue their careers within VA. Awardees from this program have become national and international leaders in their research fields. In March 2018, RRD9 reviewed six Level I (IK1) and 19 Level II (IK2) applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit and mission relevance of the research plan including protection of animal and human subjects, especially for those at risk of SUICIDE; the applicant's demonstration of a high degree of potential in his/her area of interest to develop into an independent research scientist; and the applicant's mentor(s) qualifications, training program, and strong commitment to VA.	03/01/2018 - 03/01/2018
The Spinal Cord Injury and Neuropathic Pain Subcommittee (RRDA) focuses on innovative engineering, pharmacological, and genetic approaches to examine the consequences of spinal cord and nerve injuries. Loss of bowel, bladder and sexual function, and the development of nerve-related (neuropathic) pain are consequences of spinal cord or nerve injury. Research reviewed by the Spinal Cord Injury and Neuropathic Pain Subcommittee may ultimately IMPROVE TIMELINESS and community care by providing Veterans suffering from a myriad of debilitating and painful conditions with GREATER CHOICE of treatments matched to their clinical needs and preferences, leading to improved relationships between the Veteran and their healthcare providers, and advancing their road to recovery. In March 2018, RRDA reviewed 14 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and the feasibility of rehabilitation research proposals on chronic spinal cord injury and neuropathic pain.	03/01/2018 - 03/01/2018
The Centers and Rehabilitation Enhancement Award Programs (REAPs) Subcommittee (RRDC) focuses on proposals with a goal to cultivate a community of VA clinical scientists who pursue research objectives within a rehabilitation translational framework while mentoring new investigators. Research within Centers and REAPS strive to examine interventions with potential to promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. Currently funded Centers and REAPs focus on rehabilitation research in the areas of vision, hearing, reintegration, spinal cord injury, traumatic brain injury, prosthetics, wheelchair technology, and restoration of the nervous system. In March 2018, RRDC reviewed applications from five Centers seeking continued funding and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development officer, on each Center's cultivation of a community of VA clinical scientists and scholars within the VA health care system for the purpose of pursuing specific research objectives in accordance with well-reasoned five-year plans. In FY18, the following Center/REAP applications were reviewed: • Center for Wheelchairs and Associated Rehabilitation Engineering, Pittsburgh, PA • Brain Rehabilitation Research Center, Gainesville, FL • Center for the Prevention and Treatment of Visual Loss, Iowa City, IA • Translational Research Center for TBI and Stress Disorders (TRACTS), Boston, MA • Center for Restoration of Nervous System Function, West Haven, CT	03/15/2018 - 03/15/2018

The Small Projects in Rehabilitation Research (SPiRE) Subcommittee (RRDS) focuses on research that is broadly intended to support projects that are more appropriately addressed by shorter and smaller investigations (i.e., less time and resource intensive) than a full merit research application. These experiments may include applications that have high risk, but high potential impact, applications from early career stage investigators, senior investigators seeking to explore avenues of research outside of their current area of study, as well as research areas lacking extensive or any preliminary data. SPiRE proposals cover all portfolio areas within rehabilitation research and development. Research in this program strives to examine potential interventions with potential to promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans. For the Spring 2018 cycle, RRDS completed a mail-in only editorial review of 70 small project applications in rehabilitation research via a mail-in critique and score for each application completed by three or more assigned reviewers. Summary statements and scores were shared with the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, for consideration of funding based on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of SUICIDE, and feasibility of the small project proposals. NOTE: No meeting minutes as this is an editorial mail-in only scientific review.	04/24/2018 - 04/24/2018
The Behavioral Health and Social Reintegration Subcommittee (RRD4) examines new interventions that enable Veterans to live more successful lives. Research reviewed by the Behavioral Health and Social Reintegration Subcommittee may ultimately enhance community care by improving relationships between Veterans and their healthcare providers. Research on new technologies and platforms evaluates easier and TIMELY ACCESS TO SERVICES, works to reduce SUICIDE RISK and Veteran homelessness, and provides job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. Examples of research reviewed by the Subcommittee includes, but is not limited to: development of cognitive measures, cognitive rehabilitation, cognitive behavior therapy to manage pain, complementary medical techniques to treat mental and physical conditions, rehabilitation of cancer patients and survivors, reduction of obesity, use of telehealth, and strategies for optimizing vocational rehabilitation and community reintegration for Veterans. In August 2018, RRD4 reviewed 21 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of SUICIDE, and feasibility of rehabilitation research proposals related to mental health, cognitive functioning, physical disabilities, chronic illnesses, vocational rehabilitation and community reintegration.	08/07/2018 - 08/07/2018
The Rehabilitation Engineering and Prosthetics/Orthotics Subcommittee (RRD5) improves the quality of care, GREATER CHOICE and IMPROVED TIMELINESS of care, within the Veterans Health Administration by focusing on the development of devices, technology, and algorithms. Research in engineering and technology intends to improve the lives of Veterans with disabilities with an emphasis on device development/ improvement. Research in this area includes, but is not limited to: neural prostheses (motor and sensory), rehabilitation robotics, rehabilitative sensing and telemetry, prosthetic socket design, orthotics, mobile technology, virtual reality, and potential "orphan technologies" that are specific to Veterans. In August 2018, RRD5 reviewed 20 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to engineering and technology.	08/07/2018 - 08/07/2018

The Brain Health and Injury Subcommittees (RRD1 and RRDB) review research on traumatic brain injury (TBI) as a major risk factor for related psychological health conditions. Without a comprehensive diagnosis, the combination of these conditions can increase the risk of homelessness and SUICIDE for some Veterans. Proposals reviewed by the Brain Injury Subcommittees are actively developing diagnostics to identify Veterans with chronic TBI so they can be treated before entering the downward spiral toward homelessness or increased risk of SUICIDE. This Subcommittee also reviews proposals aimed at improving diagnosis of chronic central nervous system changes due to injury and disease and the functional disability associated with these conditions; animal and human studies evaluating novel treatments either alone or in combination with other therapies; and application of neuroimaging to the rehabilitation of brain disorders. In August 2018, RRD1 reviewed 27 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of SUICIDE, and feasibility of rehabilitation research proposals related to TBI and stroke rehabilitation and/or treatments to enhance recovery from these events.	08/07/2018 - 08/08/2018
The Career Development Award Subcommittee (RRD9) focuses on research that encompasses content areas from all of the Rehabilitation Research and Development Service's portfolios. Research in this program strives to examine potential interventions that promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. The program was designed to attract, develop, and retain talented VA-ORD researchers in areas of particular importance to VA. In this program, both clinically and non-clinically trained post-doctoral researchers may gain mentored research time intended to advance awardees toward independence as funded VA-ORD scientists. Implicit in all applications is the understanding that the applicants plan to continue their careers within VA. Awardees from this program have become national and international leaders in their research fields. In August 2018, RRD9 reviewed 5 Level I (IK1) and 14 Level II (IK2) applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit and mission relevance of the research plan including protection of animal and human subjects, especially for those at risk of SUICIDE; the applicant's demonstration of a high degree of potential in his/her area of interest to develop into an independent research scientist; and the applicant's mentor(s) qualifications, training program, and strong commitment to VA.	08/08/2018 - 08/08/2018
The Spinal Cord Injury/Disorders and Neuropathic Pain Subcommittee (RRDA) focuses on innovative engineering, pharmacological, and genetic approaches to examine the consequences of spinal cord and nerve injuries and disorders such as Amyotrophic Lateral Sclerosis or Multiple Sclerosis. Loss of bowel, bladder and sexual function, and the development of nerve-related (neuropathic) pain are consequences of spinal cord or nerve injury and disorders. Research reviewed by the Spinal Cord Injury/Disorders and Neuropathic Pain Subcommittee may ultimately IMPROVE TIMELINESS and community care by providing Veterans suffering from a myriad of debilitating and painful conditions with GREATER CHOICE of treatments matched to their clinical needs and preferences, leading to improved relationships between the Veteran and their healthcare providers, and advancing their road to recovery. In August 2018, RRDA reviewed 17 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and the feasibility of rehabilitation research proposals on chronic spinal cord injury/disorders and neuropathic pain.	08/08/2018 - 08/08/2018

The Musculoskeletal Health and Function Subcommittee (RRD2) advances development of effective interventions with the potential for GREATER CHOICE and IMPROVED TIMELINESS by providing VA healthcare providers with evidence-based treatments matched to the clinical needs of Veterans recovering from life-threatening wounds (trauma) and chronic limitations, particularly military-acquired conditions and diseases, to ultimately improve the quality of life of Veterans. Examples of research reviewed by the Subcommittee include, but are not limited to: telehealth/telerehabilitation, exercise, nutrition, and other treatments to improve muscle structure and function, improve nervous system control, increase metabolic activity, decrease pain, reduce falls, and enhance daily function after injury and disease. In August 2018, RRD2 reviewed 31 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to musculoskeletal, orthopedic and medical conditions.	08/08/2018 - 08/09/2018
The Sensory Systems and Communication Disorders Subcommittee (RRD3) reviews research that promotes scientific advances supporting world-class comprehensive specialized healthcare and improved quality of life for Veterans. These interventions have the potential to promote GREATER CHOICE and IMPROVED TIMELINESS of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, and by developing technologies to decrease barriers to ACCESS by Veterans who cannot hear, see, or speak. Research reviewed by the Sensory Systems and Communication Disorders Subcommittee focuses on the diagnosis, treatment, and rehabilitation of the most common debilitating problems faced by Veterans: hearing disorders including tinnitus (abnormal sounds), noise-, blast-, or age-related hearing loss, hearing aids, cochlear implants, and aural rehabilitation; balance disorders; visual impairment, including macular degeneration, diabetic retinopathy, and low vision; dysphagia or swallowing disorders; disorders of speech and language production and perception, including vascular- or trauma-related aphasia and dysarthria; and multisensory impairment. In August 2018, RRD3 reviewed 8 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to sensory systems and communication disorders.	08/09/2018 - 08/09/2018
The Career Development Award Subcommittee (RRD8) focuses on research that encompasses content areas from all of the Rehabilitation Research and Development Service's portfolios. Research in this program strives to examine potential interventions that promote GREATER CHOICE of treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their healthcare providers, IMPROVE TIMELINESS of care by examining different technologies and platforms to reduce barriers to access, work to reduce Veteran homelessness and SUICIDE risk, and provide job training to Veterans to ENHANCE THEIR WELL-BEING and INDEPENDENCE throughout their life journey. The program was designed to attract, develop, and retain talented VA-ORD researchers in areas of particular importance to VA. In this program, both clinically and non-clinically trained post-doctoral researchers may gain mentored research time intended to advance awardees toward independence as funded VA-ORD scientists. Implicit in all applications is the understanding that the applicants plan to continue their careers within VA. Awardees from this program have become national and international leaders in their research fields. In August 2018, RRD8 reviewed 3 Level I (IK1) and 8 Level II (IK2) applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit and mission relevance of the research plan including protection of animal and human subjects, especially for those at risk of SUICIDE; the applicant's demonstration of a high degree of potential in his/her area of interest to develop into an independent research scientist; and the applicant's mentor(s) qualifications, training program, and strong commitment to VA.	08/09/2018 - 08/09/2018

The Regenerative Rehabilitation Subcommittee (RRD0) reviews research developing novel cell-based regenerative technologies that repair damaged tissues in order to restore function and independence in Veterans living with spinal cord injury, traumatic brain injury, stroke, osteoarthritis, and other injuries and diseases. These technologies may ultimately allow GREATER CHOICE by improving Veteran-driven care and providing VA healthcare providers with personalized technologies matched to the clinical needs of Veterans living with these and other debilitating conditions. In August 2018, RRD0 reviewed 13 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and the feasibility of proposals on regenerative approaches to repair and restore a Veteran's function following chronic, traumatic or disease related degeneration of the musculoskeletal or nervous systems.	08/10/2018 - 08/10/2018
The Chronic Medical Conditions and Aging Subcommittee (RRD6) focuses on cutting-edge pre-clinical, applied and clinical research on therapies to improve the rehabilitation and quality of life for aging Veterans and those Veterans dealing with complex chronic medical conditions and neurodegenerative diseases. Examples of research reviewed by the Subcommittee include, but are not limited to: creation of new physical rehabilitation strategies for Veterans suffering from cardiopulmonary disorders, diabetes, and conditions of aging including Parkinson's disease, dementia, frailty, muscle atrophy, incontinence and falls. These interventions in a foundational area have the potential to produce GREATER CHOICE and IMPROVED TIMELINESS with treatments matched to the clinical needs and preferences of the Veteran, and enhance community care by improving relationships between the Veteran and their healthcare providers. Research reviewed by the Subcommittee focuses on the rapid development of effective new treatments and rehabilitative strategies for Veterans dealing with complex chronic medical conditions and the natural consequences of aging, including neurodegenerative conditions. In August 2018, RRD6 reviewed 7 rehabilitation research and development applications and advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects, and feasibility of rehabilitation research proposals related to complex chronic medical conditions and aging including neurodegenerative conditions.	08/10/2018 - 08/10/2018

Number of Committee Meetings Listed: 23

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	$24,850.00	$25,595.00
18a(2). Personnel Pmts to Federal Members	$31,520.00	$32,465.00
18a(3). Personnel Pmts to Federal Staff	$446,527.00	$459,923.00
18a(4). Personnel Pmts to Non-Member Consultants	$45,650.00	$47,020.00
18b(1). Travel and Per Diem to Non-Federal Members	$45,701.00	$47,072.00
18b(2). Travel and Per Diem to Federal Members	$16,861.00	$17,367.00
18b(3). Travel and Per Diem to Federal Staff	$75,911.00	$78,188.00
18b(4). Travel and Per Diem to Non-member Consultants	$58,044.00	$59,785.00
18c. Other(rents,user charges, graphics, printing, mail, etc.)	$19,968.00	$20,567.00
18d. Total	$765,032.00	$787,982.00
19. Federal Staff Support Years (FTE)	7.80	7.80

20a. How does the Committee accomplish its purpose?

The purpose of every Board subcommittee is to provide high quality scientific peer review of proposed projects to improve the health and health care of our Nation's Veterans. These projects examine potential interventions that promote GREATER CHOICE of rehabilitation treatments matched to the clinical needs and preferences of the Veteran, enhance community care by improving relationships between the Veteran and their

healthcare providers, IMPROVE TIMELINESS of care by examining technologies and platforms to reduce barriers to access for Veterans with disabilities, work to reduce Veteran homelessness and suicide risk, and provide job training to Veterans TO SUPPORT THEIR WELL-BEING AND INDEPENDENCE THROUGHOUT THEIR LIFE JOURNEY. In 2018, the Board reviewed 514 proposals for scientific, programmatic and technical excellence. The Board accomplishes its work assisted by an information technology platform developed by the National Institutes of Health, thus conforming to the VA Strategic Goals to MODERNIZE SYSTEMS. Each proposal was individually reviewed by at least three interdisciplinary panel members; a summary of discussions/recommendations and a summary statement of the assigned reviewer critiques from the Board was prepared for each proposal. Board suggestions have resulted in improved research plans. The Board advised the Director, Rehabilitation Research and Development Service, and the Chief Research and Development Officer, on the scientific and technical merit, mission relevance, originality, protection of animal and human subjects, especially for those at risk of suicide, and feasibility of rehabilitation research proposals. Duplicate and unnecessary research was avoided. The Board merit review promotes ACCOUNTABILITY by ensuring effective allocation of RR&D resources, ensuring that research selected for funding has the greatest potential to ultimately strengthen foundational services in VA, and identifying areas for special oversight in funded projects. In addition, post-meeting briefings solicit important feedback for ongoing improvement of overall meeting processes. All Board recommendations were accepted by the Director and only the most scientifically meritorious projects were funded. For additional details on the purpose and areas of FY18 funding along with connections to the VA Strategic Goals, please see each Committee Meeting's description/purpose.

20b. How does the Committee balance its membership?

The Board is representative of a variety of scientific, technical and medical disciplines in the area of neurological dysfunction/spinal cord injury; restoration rehabilitation surgery; orthopedic/vascular; amputations/prosthetic/orthotics; communicative, cognitive and sensory aids; spinal cord injury; schizophrenia; geriatric rehabilitation; outcomes studies; dementia and aging. Among the members are biomechanical engineers, surgeons, psychiatrists, research methodologists, audiologists, speech pathologists, neurologists, psychologists and other experts, as well as representatives of Veteran service organizations. The points of view are reflected to provide interdisciplinary expertise needed to coincide with Rehabilitation Research and Development priority areas. The Board is diverse in its ethnic/racial/gender and geographic composition.

20c. How frequent and relevant are the Committee Meetings?

The Board and its subcommittees will meet up to 2 times per year. In-person and

teleconference review meetings are held locally in the Washington, D.C. area in late summer and mid-winter; editorial reviews (mail-in only) are held in late fall and early spring. The purpose of each session is to review all proposals submitted in March, June, September, and December of each year. Also, there are occasions in which ad hoc reviews are held at different times in response to special solicitations. Members also provide technical assistance on other issues, such as preparation and review of five-year plans, site visits and small (pilot) projects.

20d. Why can't the advice or information this committee provides be obtained elsewhere?

Submitted proposals are of a highly scientific and technical nature and involve the application of medical research to rehabilitation. Board members are experts in their respective fields and are currently involved in state-of-the-art research in rehabilitation. Staff does not have the highly technical, scientific and collective interdisciplinary knowledge required to evaluate and make decisions as to the scientific and technical validity of these projects.

20e. Why is it necessary to close and/or partially closed committee meetings?

The meetings are partially closed because of the confidential nature of the proposals being reviewed and the integrity of the peer review process. Scientific proposals contain research ideas original to the applicants and do not become public until they are printed in scientific journals.

21. Remarks

In 2018, Federal Staff Support Years increased by two scientific program manager FTEs at 50% based on previously vacant staff positions that provide effort to Board activities.

Designated Federal Officer

Tiffany Asqueri Health Science Specialist

Committee Members	Start	End	Occupation	Member Designation
Acierno, Ronald	08/01/2016	08/31/2020	Ralph H. Johnson VA Medical Center and Medical University of South Carolina, College of Nursing, Charleston, SC	Regular Government Employee (RGE) Member
Adamczyk, Peter	08/01/2015	08/31/2018	Intelligent Prosthetic Systems, LLC, Ann Arbor, MI	Special Government Employee (SGE) Member
Agoston, Denes	08/01/2016	08/31/2019	Uniformed Services University of the Health Sciences, Anatomy, Physiology and Genetics, Bethesda, MD	Special Government Employee (SGE) Member

Alvarez, Luis	02/01/2017	02/28/2019	United States Military Academy, Center for Molecular Science, West Point, NY	Regular Government Employee (RGE) Member
Bae, Sejong	08/01/2015	08/31/2019	University of Alabama at Birmingham, Division of Preventive Medicine, Birmingham, AL	Special Government Employee (SGE) Member
Bazrgari, Babak	02/01/2018	02/28/2022	University of Kentucky, F. Joseph Halcomb Department of Biomedical Engineering, Lexington, KY	Special Government Employee (SGE) Member
Beals, Kim	08/01/2017	08/31/2020	University of Pittsburgh, Neuromuscular Research Laboratory, Pittsburgh, PA	Special Government Employee (SGE) Member
Begum, Momotaz	08/01/2017	08/31/2020	University of New Hampshire, Computer Science, Durham, NH	Special Government Employee (SGE) Member
Benz, Heather	08/01/2016	08/31/2020	U.S. Food and Drug Administration, Center for Devices and Radiological Health, Silver Spring, MD	Regular Government Employee (RGE) Member
Bertocci, Gina	08/01/2017	08/31/2021	University of Louisville, Department of Bioengineering, Louisville, KY	Special Government Employee (SGE) Member
Butler, Andrew	03/01/2016	02/28/2019	Atlanta VA Health Care System and Georgia State University, Physical Therapy Department, Atlanta, GA	Regular Government Employee (RGE) Member
Cardozo, Christopher	08/01/2017	08/31/2020	James J. Peters VA Medical Center and Icahn School of Medicine at Mount Sinai, Bronx, NY	Regular Government Employee (RGE) Member
Carlozzi, Noelle	08/01/2014	08/31/2018	University of Michigan Medical School, Department of Physical Medicine and Rehabilitation and Center for Clinical Outcomes Development and Application, Ann Arbor, MI	Special Government Employee (SGE) Member
Cernak, Ibolja	03/01/2016	02/28/2019	University of Alberta, Canadian Military and Veterans' Clinical Rehabilitation Research, Rehabilitation Medicine, Edmonton, Alberta, Canada	Special Government Employee (SGE) Member
Chen, Dong Feng	02/01/2018	02/28/2022	Harvard Medical School, Schepens Eye Research Institute of Massachusetts Eye and Ear, Boston, MA	Special Government Employee (SGE) Member
Cheng, Jeffrey	02/01/2018	02/28/2022	Harvard University Medical School, Department of Otolaryngology, Lexington, MA	Special Government Employee (SGE) Member
Citron, Bruce	03/01/2016	02/28/2019	C.W. Bill Young VA Medical Center and University of South Florida, Department of Molecular Medicine, Bay Pines, FL	Regular Government Employee (RGE) Member

Collins, Jamie	08/01/2016	08/31/2020	Brigham and Women's Hospital, Orthopaedic and Arthritis Center for Outcomes Research, Boston, MA	Special Government Employee (SGE) Member
Conti, Alana	03/01/2016	02/29/2020	John D. Dingell VA Medical Center and Wayne State University, School of Medicine, Detroit, MI	Regular Government Employee (RGE) Member
Copeland, Laurel	02/01/2014	02/28/2018	Central Texas Veterans Health Care System, Temple, TX	Regular Government Employee (RGE) Member
Crish, Samuel	02/01/2018	02/28/2022	Northeast Ohio Medical University, Department of Pharmaceutical Sciences, Rootstown, OH	Special Government Employee (SGE) Member
Curley, Kenneth	08/01/2016	08/31/2019	Iatrikos Research and Development Strategies, LLC, and Uniformed Services University of the Health Sciences, Department of Surgery, Tampa, FL	Special Government Employee (SGE) Member
DaSilva, Alexandre	03/01/2016	02/29/2020	University of Michigan School of Dentistry, Biologic and Materials Sciences, Ann Arbor, MI	Special Government Employee (SGE) Member
Davey, Pinakin	08/01/2016	08/31/2020	Western University of Health Sciences, College of Optometry, Pomona, CA	Special Government Employee (SGE) Member
DiMaria-Ghalili, Rose	08/01/2015	08/31/2019	Drexel University, Doctoral Nursing, Nutrition and Sciences Department, Philadelphia, PA	Special Government Employee (SGE) Member
Doucet, Barbara	08/01/2016	08/31/2018	Louisiana State University, Department of Occupational Therapy, New Orleans, LA	Special Government Employee (SGE) Member
Ehde, Dawn	08/01/2016	08/31/2019	University of Washington, Department of Clinical Neuropsychology and Department of Rehabilitation, Seattle, WA	Special Government Employee (SGE) Member
Eliason, David	02/01/2018	02/28/2022	Walter Reed National Military Medical Center, Vision Center of Excellence, Bethesda, MD	Regular Government Employee (RGE) Member
Estes, Bradley	08/01/2014	08/31/2018	Cytex Therapeutics, Inc., Research and Development, Durham, NC	Special Government Employee (SGE) Member
Falvo, Michael	02/01/2017	02/29/2020	VA New Jersey Healthcare System and New Jersey Medical School, Rutgers Biomedical and Health Sciences, East Orange, NJ	Regular Government Employee (RGE) Member
Fatone, Stefania	03/01/2016	02/29/2020	Northwestern University, Feinberg School of Medicine, Department of Physical Medicine and Rehabilitation, Chicago, IL	Special Government Employee (SGE) Member

Fisher, Jonathan	08/01/2017	08/31/2021	New York Medical College, Physiology Department, Valhalla, NY	Special Government Employee (SGE) Member
Floyd, Candace	02/01/2018	02/28/2021	VA Salt Lake City Health Care System and University of Utah, Division of Physical Medicine and Rehabilitation, Salt Lake City, UT	Regular Government Employee (RGE) Member
Freedman, Brett	08/01/2014	08/31/2018	Landstuhl Regional Medical Center, Spine and Neurosurgery Suite and Department of Orthopaedics and Rehabilitation, Landstuhl, Germany	Regular Government Employee (RGE) Member
Garraway, Sandra	08/01/2016	08/31/2020	Emory University, Department of Physiology, Atlanta, GA	Special Government Employee (SGE) Member
Geil, Mark	08/01/2015	08/31/2019	Georgia State University, Department of Kinesiology and Health, Atlanta, GA	Special Government Employee (SGE) Member
Goodman, Marianne	08/01/2017	08/31/2021	James J. Peters VA Medical Center, MIRECC and Mount Sinai School of Medicine, Psychology Department, Bronx, NY	Regular Government Employee (RGE) Member
Greising, Sarah	02/01/2018	02/28/2021	University of Minnesota, Department of Kinesiology, Minneapolis, MN	Special Government Employee (SGE) Member
Griffiths, Patricia	02/01/2014	02/28/2018	Atlanta VA Medical Center, Decatur, GA	Regular Government Employee (RGE) Member
Grondin, Richard	08/01/2016	08/31/2020	University of Kentucky Medical Center, Department of Anatomy and Neurobiology, Lexington, KY	Special Government Employee (SGE) Member
Hamill, Joseph	08/01/2016	08/31/2018	University of Massachusetts, Department of Kinesiology, Amherst, MA	Special Government Employee (SGE) Member
Harley, Brendan	03/01/2016	02/28/2019	University of Illinois at Urbana-Champaign, Department of Chemical and Biomolecular Engineering, Urbana, IL	Special Government Employee (SGE) Member
Helms Tillery, Stephen	02/01/2018	02/28/2022	Arizona State University, School of Biological and Health Systems Engineering, Neural Engineering, Research, and Ethics, Tempe, AZ	Special Government Employee (SGE) Member
Highsmith, M. Jason	08/01/2015	08/31/2019	Extremity Trauma and Amputation Center of Excellence, Tampa, FL	Regular Government Employee (RGE) Member
Hooshmand, Shirin	02/01/2018	02/28/2022	San Diego State University, School of Exercise and Nutritional Sciences, San Diego, CA	Special Government Employee (SGE) Member

Horan, William	03/01/2016	02/29/2020	VA Greater Los Angeles Healthcare System and University of California at Los Angeles, Department of Psychiatry and Behavioral Sciences, Los Angeles, CA	Regular Government Employee (RGE) Member
Hunt, Peter	02/01/2014	02/28/2018	VA Long Beach Healthcare System, Long Beach, CA	Regular Government Employee (RGE) Member
Hurst, Samantha	08/01/2016	08/31/2020	VA San Diego Healthcare System, Center for Excellence for Stress and Mental Health and University of California, Department of Family and Preventive Medicine, La Jolla, CA	Regular Government Employee (RGE) Member
Husain, Shahid	08/01/2017	08/31/2020	Medical University of South Carolina, Department of Ophthalmology, Charleston, SC	Special Government Employee (SGE) Member
Johnson, Lee	08/01/2016	08/31/2020	Naval Research Laboratory, Optical Sciences Division and Uniformed Services University of the Health Sciences, Washington, DC	Regular Government Employee (RGE) Member
Joshi, Sanjay	02/01/2018	02/28/2022	University of California, Mechanical and Aerospace Engineering, Davis, CA	Special Government Employee (SGE) Member
King, Paul	08/01/2014	08/31/2018	VA Center for Integrated Healthcare, Center of Excellence in Primary Care-Mental Health Integration, Buffalo, NY	Regular Government Employee (RGE) Member
Koliatsos, Vassilis	08/01/2016	08/31/2020	The Johns Hopkins University, School of Medicine, Department of Pathology, Towson, MD	Special Government Employee (SGE) Member
Lane, Michael	02/01/2018	02/28/2021	Drexel University, Neurobiology Department, Philadelphia, PA	Special Government Employee (SGE) Member
Lepore, Angelo	08/01/2016	08/31/2020	Thomas Jefferson University, Sidney Kimmel Medical College, Department of Neuroscience, Philadelphia, PA	Special Government Employee (SGE) Member
Li, Fuzhong	08/01/2016	08/31/2020	Oregon Research Institute, Eugene, OR	Special Government Employee (SGE) Member
Malandraki, Gerogia	02/01/2018	02/28/2022	Purdue University, Department of Speech, Language and Hearing Sciences, West Lafayette, IN	Special Government Employee (SGE) Member
Mete, Mihriye	03/01/2016	02/29/2020	Georgetown University Medical Center and MedStar Health Research Institute, Hyattsville, MD	Special Government Employee (SGE) Member
Myaskovsky, Larissa	08/01/2016	08/31/2020	VA Pittsburgh Healthcare System, Center for Health Equity Research and Promotion and University of Pittsburgh, Medicine, Psychiatry and Clinical and Translational Science, Pittsburgh, PA	Regular Government Employee (RGE) Member

Myklebust, Barbara	08/01/2015	08/31/2018	Independent Consultant, Germantown, MD	Special Government Employee (SGE) Member
Narmoneva, Daria	08/01/2015	08/31/2018	University of Cincinnati, Department of Biomedical Engineering, Cincinnati, OH	Special Government Employee (SGE) Member
Nolan, Karen	08/01/2017	08/31/2020	Rutgers University - New Jersey Medical School, Department of Physical Medicine and Rehabilitation, Kinnelon, NJ	Special Government Employee (SGE) Member
Nugent, Allison	08/01/2015	08/31/2019	National Institute of Mental Health, Experimental Therapeutics and Pathophysiology Branch, Bethesda, MD	Regular Government Employee (RGE) Member
Obenaus, Andre	08/01/2017	08/31/2020	University of California, Irvine, Department of Pediatrics, Preclinical and Translational Imaging Center, Irvine, CA	Special Government Employee (SGE) Member
Olfert, Ivan	08/01/2015	08/31/2018	West Virginia Univesity School of Medicine, Division of Exercise Physiology, Morgantown, WV	Special Government Employee (SGE) Member
Orendurff, Michael	08/01/2014	08/31/2018	Orthocare Innovations, Inc., Biomechanics Laboratory, Mountlake Terrace, WA	Special Government Employee (SGE) Member
Orr, Joseph	08/01/2016	08/31/2020	Texas A&M University, Department of Psychology, College Station, TX	Special Government Employee (SGE) Member
Oudega, Martin	08/01/2015	08/31/2019	University of Miami, Miller School of Medicine, Department of Neurological Surgery and The Miami Project to Cure Paralysis, Miami, FL	Special Government Employee (SGE) Member
Oweiss, Karim	03/01/2016	02/29/2020	Department of Electrical and Computer Engineering, University of Florida, Gainesville, FL	Special Government Employee (SGE) Member
Peskind, Elaine	03/01/2016	02/29/2020	VA Northwest Network Mental Illness Research, Education and Clinical Center, VA Puget Sound Health Care System, Seattle, WA	Regular Government Employee (RGE) Member
Petruska, Jeffrey	08/01/2014	08/31/2018	University of Louisville, Department of Anatomical Sciences and Neurobiology, Kentucky Spinal Cord Injury Research Center, Department of Neurological Surgery, Louisville, KY	Special Government Employee (SGE) Member
Petzinger, Giselle	08/01/2016	08/31/2020	University of Southern California, Department of Neurology, Los Angeles, CA	Special Government Employee (SGE) Member
Pittman, Andrea	08/01/2016	08/31/2020	Arizona State University, Department of Speech and Hearing Science, Tempe, AZ	Special Government Employee (SGE) Member

Polusny, Melissa	03/01/2016	02/29/2020	Minneapolis VA Health Care System, Minneapolis, MN	Regular Government Employee (RGE) Member
Randolph, Billie	08/01/2015	08/31/2018	Extremity Trauma and Amputation Center of Excellence, Falls Church, VA	Regular Government Employee (RGE) Member
Resnick, Helaine	08/01/2016	08/31/2020	Baltimore VA Geriatric Research Education and Clinical Center; Resnick, Chodorow and Associates; and University of Maryland, Division of Geriatric Medicine, Silver Spring, MD	Regular Government Employee (RGE) Member
Sadowsky, Cristina	02/01/2017	02/28/2021	Johns Hopkins School of Medicine, Physical and Rehabilitation Medicine and International Center for Spinal Cord Injury at Kennedy Krieger Institute, Paralysis Restoration Clinic, Baltimore, MD	Special Government Employee (SGE) Member
Schulz, Geralyn	08/01/2016	08/31/2020	George Washington University, Department of Speech and Hearing Science, Washington, DC	Special Government Employee (SGE) Member
Shapiro, Lee	03/01/2016	02/29/2020	Texas A&M University, College of Medicine, Department of Surgery, Temple, TX	Special Government Employee (SGE) Member
Shinn, Jennifer	08/01/2017	08/31/2021	University of Kentucky, Department of Otolaryngology, Lexington, KY	Special Government Employee (SGE) Member
Smith, Jeffrey	03/01/2016	02/29/2020	Saginaw Valley State University, College of Health and Human Services, University Center, MI	Special Government Employee (SGE) Member
Smith, Lachlan	02/01/2017	02/28/2021	Philadelphia VA Medical Center and University of Pennsylvania, Departments of Neurosurgery and Orthopaedic Surgery, Philadelphia, PA	Regular Government Employee (RGE) Member
Stergiou, Nick	02/01/2014	02/28/2018	University of Nebraska at Omaha, Biomechanics Research, Omaha, NE	Special Government Employee (SGE) Member
Stiles, Travis	08/01/2017	08/31/2021	Founder/CEO Novoron Bioscience, Inc.	Special Government Employee (SGE) Member
Stout, Nicole	02/01/2017	02/29/2020	Marymount University, Research Methods, Arlington, VA	Special Government Employee (SGE) Member
Sugar, Catherine	08/01/2016	08/31/2020	VISN 22 Mental Illness Research, Education and Clinical Center and University of California, Department of Psychiatry and Biobehavioral Sciences, Los Angeles, CA	Regular Government Employee (RGE) Member
Supiano, Mark	08/01/2016	08/31/2018	VA Salt Lake City Health Care System and University of Utah, Internal Medicine and Geriatrics, Salt Lake City, UT	Regular Government Employee (RGE) Member

Taber-Maier, Katherine	08/01/2017	08/31/2020	W.G. (Bill) Hefner VA Medical Center, Research and Development and College of Osetopathic Medicine, Salisbury, NC	Regular Government Employee (RGE) Member
Vasterling, Jennifer	03/01/2016	02/29/2020	VA Boston Healthcare System and Boston University School of Medicine, Boston, MA	Regular Government Employee (RGE) Member
Venugopal, Sandya	08/01/2017	08/31/2021	Founder/CEO Venugopals Consulting Services, Phoenix, AZ	Special Government Employee (SGE) Member
Wade, Michael	08/01/2016	08/31/2020	University of Minnesota, Center for Cognitive Science and School of Kinesiology, Minneapolis, MN	Special Government Employee (SGE) Member
Walden, Therese	02/01/2018	02/28/2022	Potomac Audiology, Rockville, MD	Special Government Employee (SGE) Member
Wang, Edward	08/01/2015	08/31/2019	University of Illinois at Chicago, College of Applied Health Sciences, Chicago, IL	Special Government Employee (SGE) Member
Wecht, Jill	02/01/2017	02/28/2019	James J. Peters VA Medical Center and Ichan School of Medicine at Mount Sinai, Medicine and Rehabilitation Medicine, Bronx, NY	Regular Government Employee (RGE) Member
Wheeler, Tracey	08/01/2017	08/31/2021	Craig H. Neilsen Foundation, Oakton, VA	Special Government Employee (SGE) Member
White, Kevin	02/01/2017	02/28/2021	James A. Haley Veterans' Hospital and University of South Florida, Neurology/Physical Medicine and Rehabilitation, Tampa, FL	Regular Government Employee (RGE) Member
Wilde, Elisabeth	08/01/2016	08/31/2020	Michael E. DeBakey VA Medical Center and Baylor College of Medicine, Research for Physical Medicine and Rehabilitation, Houston, TX	Regular Government Employee (RGE) Member
Winkowski, Daniel	02/01/2018	02/28/2021	University of Maryland, Department of Biology, College Park, MD	Special Government Employee (SGE) Member
Wolf, Erik	02/01/2018	02/28/2022	U.S. Army Medical Research Materiel Command, Clinical and Rehabilitative Medicine Research Program, Neuromusculoskeletal Injury Rehabilitation, Fort Detrick, MD	Regular Government Employee (RGE) Member
Wolfe, Christopher	08/01/2016	08/31/2020	Saint Leo University, Department of Psychology, Tampa, FL	Special Government Employee (SGE) Member
Yamaguchi, Dean	08/01/2017	08/31/2021	VA Greater Los Angeles Healthcare System, Research and Development and University of California, Los Angeles, David Geffen School of Medicine, Los Angeles, CA	Regular Government Employee (RGE) Member

Yang, Yunzhi	08/01/2014	08/31/2018	Stanford University School of Medicine, Department of Orthopedic Surgery, Stanford Bio-X Program and Stanford Cardiovascular Institute, Stanford, CA	Special Government Employee (SGE) Member

Number of Committee Members Listed: 102

Narrative Description

The Board advises VA Rehabilitation Research and Development Service Director and the Chief Research and Development Officer in VHA on the scientific and technical merit, mission relevance, originality, protection of human and animal subjects and the feasibility of proposals reviewed. Recommendations from the Board result in the funding of programs and research projects that support the mission of the VA, which is to promote functional independence and improve the quality of life for Veterans.

What are the most significant program outcomes associated with this committee?

	Checked if Applies
Improvements to health or safety	✓
Trust in government	
Major policy changes	
Advance in scientific research	✓
Effective grant making	
Improved service delivery	✓
Increased customer satisfaction	
Implementation of laws or regulatory requirements	
Other	✓

Outcome Comments

Recommendations of the Board also include cost-saving measures and avoidance of duplicate funding and poor quality research. The interdisciplinary expertise among Board members replaces the huge cost of providing a large and highly scientific/technical interdisciplinary staff needed to provide this expertise within the VA.

What are the cost savings associated with this committee?

	Checked if Applies
None	
Unable to Determine	✓
Under $100,000	
$100,000 - $500,000	
$500,001 - $1,000,000	
$1,000,001 - $5,000,000	

$5,000,001 - $10,000,000 ☐
Over $10,000,000 ☐
Cost Savings Other ☐

Cost Savings Comments
The interdisciplinary expertise among Board members replaces the huge cost of providing a large and highly scientific/technical interdisciplinary staff needed to provide this expertise within the VA. Cost saving comes from funding only the most meritorious research projects.

What is the approximate Number of recommendations produced by this committee for the life of the committee?
4,979

Number of Recommendations Comments
This is a total of recommendations from FY 2003 through FY 2018.

What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?
90%

% of Recommendations Fully Implemented Comments
Board recommendations are usually followed by the Director of Rehabilitation Research and Development Service, and the Chief Research and Development Officer of the Office of Research and Development. Funding of all research projects is only possible if sufficient funds are available within the Service's budget.

What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?
0%

% of Recommendations Partially Implemented Comments
N/A (see above)

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?
Yes ☑ No ☐ Not Applicable ☐

Agency Feedback Comments

Feedback is provided in the minutes distributed to the Board and in communications with members regarding their specific proposal recommendations to principal investigators.

What other actions has the agency taken as a result of the committee's advice or recommendation?

	Checked if Applies
Reorganized Priorities	☐
Reallocated resources	☑
Issued new regulation	☐
Proposed legislation	☐
Approved grants or other payments	☐
Other	☐

Action Comments

This process encourages increased collaboration and communication with other experts engaged in similar research efforts.

Is the Committee engaged in the review of applications for grants?

No

Grant Review Comments

The research proposals reviewed by the Board are internal to VA and are not considered grants to outside entities.

How is access provided to the information for the Committee's documentation?

	Checked if Applies
Contact DFO	☑
Online Agency Web Site	☑
Online Committee Web Site	☐
Online GSA FACA Web Site	☑
Publications	☐
Other	☐

Access Comments

N/A